

SENATOR COORDSEN: Okay.

SENATOR WARNER: Prior to participating in the Medicaid. Counties were paying a great deal, however, at that time for indigents.

SENATOR COORDSEN: Okay, thank you. Looking for an appropriations comm...Senator Hillman.

SENATOR HILLMAN: What is the current Medicaid cost share?

SPEAKER BAACK: Senator Hillman.

SENATOR HILLMAN: You mean as far as the state and federal matches?

SENATOR COORDSEN: State and federal matches.

SENATOR HILLMAN: It changes some, I think it's somewhere around 61 percent.

SENATOR COORDSEN: So roughly 60-40, 61-39. Okay, thank you. That is the problem that I have with the bill. Certainly is not the intent and mission is that whenever we place reliance on federal funds, at some point in time as have been indicated by other speakers, we may well regret those. Now, one question and you can have the rest of my time, Senator Rasmussen, and that is do you believe that with 520 that better results will be achieved, more effective results at equal or lower unit costs insofar as the children that are in the program? Or are we, and this is an addendum I guess to the question, are we doing what we typically do with the best of mission, simply creating more jobs for government employees?

SENATOR RASMUSSEN: A very good question. Let me answer the last part of it, and I'm not sure that was the full focus of your question. The real beauty of this structure is that the dollars go to the local community for service coordination and they decide who is going to do it. And what they are doing in both the demonstration projects are using existing resources. They are not creating new jobs for new state employees. For example, in Omaha Public Schools they are using Visiting Nurses Association as well as DSS workers and I think some folks from the Med Center, although I'm not sure about that. But they are